

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	LA-7241-111.US
	First Inventor	John D. Barber
	Title	ADDITIVES FOR USE IN POLYMER PROCESSING AND METHODS OF PREPARATION AND USE THEREOF
	Express Mail Label No.	EV323595748US

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>	<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
--	---

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>
3. <input checked="" type="checkbox"/> Specification <small>[Total Pages <u>69</u>]</small> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	a. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <small>[Total Sheets <u>22</u>]</small>	b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper
5. Oath or Declaration <small>[Total Sheets <u>    </u>]</small> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>	c. <input type="checkbox"/> Statements verifying identity of above copies
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

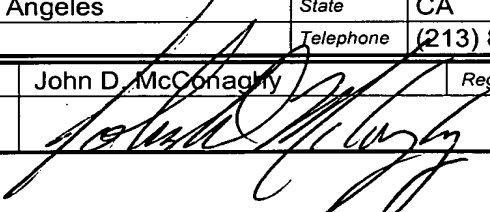
<b>ACCOMPANYING APPLICATIONS PARTS</b>	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <small>(when there is an assignee)</small>	<input type="checkbox"/> Power of Attorney
11. <input type="checkbox"/> English Translation Document (if applicable)	
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/> Preliminary Amendment	
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>	
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17. <input type="checkbox"/> Other:	

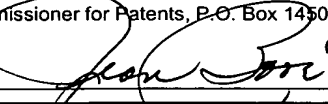
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

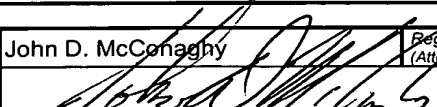
<b>19. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number:		000167		OR <input checked="" type="checkbox"/> Correspondence address below	
Name	FULBRIGHT & JAWORSKI L.L.P. John D. McConaghy				
Address	865 South Figueroa Twenty-Ninth Floor				
City	Los Angeles	State	CA	Zip Code	90017-2571
Country	US	Telephone	(213) 892-9200	Fax	(213) 680-4518

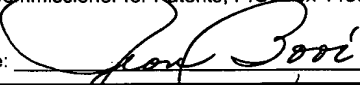
Name (Print/Type)	John D. McConaghy	Registration No. (Attorney/Agent)	26,773
Signature		Date	August 19, 2003

<b>Utility Patent Application Transmittal</b>	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV323595748US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: August 19, 2003	Signature:  (Jean Bove')

<b>FEE TRANSMITTAL</b> <b>for FY 2003</b> <small>Effective 01/01/2003, Patent fees are subject to annual revision.</small>		<b>Complete if Known</b>		
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number		
		Filing Date	August 19, 2003	
		First Named Inventor	John D. Barber	
		Examiner Name	Not Yet Assigned	
		Art Unit	N/A	
TOTAL AMOUNT OF PAYMENT	(\$)	1,460.00	Attorney Docket No.	LA-7241-111.US

<b>METHOD OF PAYMENT</b> (check all that apply)		<b>FEE CALCULATION</b> (continued)																															
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None	<b>3. ADDITIONAL FEES</b>																												
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 50-0337				<b>Large Entity</b> Fee Code (\$)																												
Deposit Account Name: Fulbright & Jaworski L.L.P.				<b>Small Entity</b> Fee Code (\$)																													
The Director is hereby authorized to: (check all that apply)																																	
<input checked="" type="checkbox"/> Charge fee(s) indicated below					<input checked="" type="checkbox"/> Credit any overpayments																												
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application																																	
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																	
<b>FEE CALCULATION</b>																																	
<b>1. BASIC FILING FEE</b>																																	
<table border="1"><thead><tr><th>Large Entity Fee Code (\$)</th><th>Small Entity Fee Code (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1001 750</td><td>2001 375</td><td>Utility filing fee</td><td>375.00</td></tr><tr><td>1002 330</td><td>2002 165</td><td>Design filing fee</td><td></td></tr><tr><td>1003 520</td><td>2003 260</td><td>Plant filing fee</td><td></td></tr><tr><td>1004 750</td><td>2004 375</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005 160</td><td>2005 80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="3">SUBTOTAL (1)</td><td>(\$) 375.00</td></tr></tbody></table>						Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	1001 750	2001 375	Utility filing fee	375.00	1002 330	2002 165	Design filing fee		1003 520	2003 260	Plant filing fee		1004 750	2004 375	Reissue filing fee		1005 160	2005 80	Provisional filing fee		SUBTOTAL (1)			(\$) 375.00
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid																														
1001 750	2001 375	Utility filing fee	375.00																														
1002 330	2002 165	Design filing fee																															
1003 520	2003 260	Plant filing fee																															
1004 750	2004 375	Reissue filing fee																															
1005 160	2005 80	Provisional filing fee																															
SUBTOTAL (1)			(\$) 375.00																														
<b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b>																																	
<table border="1"><thead><tr><th>Total Claims</th><th>Extra Claims</th><th>Fee from below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>65</td><td>-20** = 45</td><td>x 9.00 =</td><td>693.00</td></tr><tr><td>9</td><td>-3** = 6</td><td>x 42.00 =</td><td>252.00</td></tr><tr><td colspan="3">Multiple Dependent</td><td>140.00 = 140.00</td></tr></tbody></table>						Total Claims	Extra Claims	Fee from below	Fee Paid	65	-20** = 45	x 9.00 =	693.00	9	-3** = 6	x 42.00 =	252.00	Multiple Dependent			140.00 = 140.00												
Total Claims	Extra Claims	Fee from below	Fee Paid																														
65	-20** = 45	x 9.00 =	693.00																														
9	-3** = 6	x 42.00 =	252.00																														
Multiple Dependent			140.00 = 140.00																														
<table border="1"><thead><tr><th>Large Entity Fee Code (\$)</th><th>Small Entity Fee Code (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201 84</td><td>2201 42</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203 280</td><td>2203 140</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204 84</td><td>2204 42</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>1205 18</td><td>2205 9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="3">SUBTOTAL (2)</td><td>(\$) 1085.00</td></tr></tbody></table>						Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	1202 18	2202 9	Claims in excess of 20		1201 84	2201 42	Independent claims in excess of 3		1203 280	2203 140	Multiple dependent claim, if not paid		1204 84	2204 42	** Reissue independent claims over original patent		1205 18	2205 9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)			(\$) 1085.00
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid																														
1202 18	2202 9	Claims in excess of 20																															
1201 84	2201 42	Independent claims in excess of 3																															
1203 280	2203 140	Multiple dependent claim, if not paid																															
1204 84	2204 42	** Reissue independent claims over original patent																															
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent																															
SUBTOTAL (2)			(\$) 1085.00																														
**or number previously paid, if greater; For Reissues, see above																																	
<b>Other fee (specify)</b>																																	
*Reduced by Basic Filing Fee Paid																																	
SUBTOTAL (3) (\$) 0.00																																	

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	John D. McConaghy	Registration No. (Attorney/Agent)	26,773
Signature		Telephone	(213) 892-9200
		Date	August 19, 2003

<b>Fee Transmittal</b>	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV323595748US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: August 19, 2003	Signature:  (Jean Bove')